

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND								
1 Date of Request: <u>8/22/95</u>		2 Serial/Patent # <u>08/432434</u>						
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED					
<input checked="" type="checkbox"/> Filing			4/28/95					
<input type="checkbox"/> Amendment			\$					
<input type="checkbox"/> Extension of Time			\$					
<input type="checkbox"/> Notice of Appeal/Appeal			\$					
<input type="checkbox"/> Petition			\$					
<input type="checkbox"/> Issue			\$					
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$					
<input type="checkbox"/> Maintenance			\$					
<input type="checkbox"/> Assignment			\$					
<input type="checkbox"/> Other			\$					
		7 TOTAL AMOUNT OF REFUND						
		\$ 190.00						
10 REASON:		8 TO BE REFUNDED BY:						
<input checked="" type="checkbox"/> Overpayment		<input type="checkbox"/> Treasury Check						
<input type="checkbox"/> Duplicate Payment		<input checked="" type="checkbox"/> Credit Deposit A/C #:						
<input type="checkbox"/> No Fee Due (Explanation):		9 <table border="1" style="display: inline-table; text-align: center;"> <tr> <td>1</td><td>9</td><td>--</td><td>00</td><td>65</td> </tr> </table>		1	9	--	00	65
1	9	--	00	65				
11 REFUND REQUESTED BY:								
TYPED/PRINTED NAME: <u>Bridgette Douglas</u>		TITLE: <u>Examiner</u>						
SIGNATURE: <u>[Signature]</u>		PHONE: <u>308-1901</u>						
OFFICE: <u>ONR</u>								
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****								
APPROVED: <u>[Signature]</u>		DATE: <u>9/12/95</u>						

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: